

2018-2019

Application for Alternate I or Alternate II Verification Sample Size

LEA Number: _____ LEA Name: _____

Verification Contact: _____ Email: _____ Telephone: _____

Application Deadline: Friday, September 21, 2018

Completed applications must be emailed to ade.chnutverify@arkansas.gov on or before Friday, September 21, 2018. Any district that does not apply for an Alternate Verification Sampling method must use the "Standard Sampling Method" to complete the verification process. Choose the method most advantageous to the district.

_____ **Standard**

- Three percent of all applications approved by the LEA for the school year, as of October 1 of the school year, selected from the error prone applications; or
- 3000 error prone applications approved by the LEA for the school year, as of October 1 of the school year.

_____ **Alternate I – Sample size equals the lesser of**

- Three percent of all applications approved by the LEA for the school year, as of October 1, selected at random; or
- 3,000 applications approved by the LEA for the school year, as of October 1, selected at random.

_____ **Alternate II – Sample size equals the lesser of the sum of either:**

- 1,000 of all applications approved by the LEA, as of October 1, selected from error prone applications; or
- One percent of all applications approved by the LEA, as of October 1, selected from error prone applications; PLUS
- 500 applications approved by the LEA, as of October 1, which provide case numbers in lieu of income information; or
- One-half of one percent (0.05 %) of applications approved by the LEA, as of October 1, that provide case numbers in lieu of income information.

Additional information may be found <http://www.fns.usde.gov/sp27-2006-verificationsample-size>.

Child Nutrition Director

Date

For State Agency Use Only:

Approved: _____ **Denied:** _____ **Reason for Denial:** _____

Date: _____ **Approver:** _____